

Important

Effective for tax years **beginning on or after January 1, 2015**, Article 32 of the Tax Law is repealed. Corporations that were previously taxable under Article 32 are now subject to tax under Article 9-A of the Tax Law.

As a result, corporations previously taxable under Article 32 will no longer file Form(s) CT-32, CT-32-A, CT-32-M, and CT-32-S to report for tax periods beginning on or after this date.

For tax years beginning in 2015, including short periods, all corporations subject to tax under Article 9-A (including former Article 32 taxpayers) **must** file using the following forms, as applicable:

- 2015 Form CT-3, *General Business Corporation Franchise Tax Return*
- 2015 Form CT-3-A, *General Business Corporation Combined Franchise Tax Return*
- 2015 Form CT-3-M, *General Business Corporation MTA Surcharge Return*
- 2015 Form CT-3-S, *New York S Corporation Franchise Tax Return*

Any return filed on an incorrect form, or on a form for the wrong year, will **not** be processed. As a result, penalties and interest may be incurred. An exception to this rule applies to certain New York S corporations filing for a short period beginning in 2015.

Guidance concerning this exception will be issued in the near future.

[Click here](#) to open the corporate tax reform Web page



CT-32

New York State Department of Taxation and Finance

Banking Corporation Franchise Tax Return

Tax Law — Article 32

All filers must enter tax period:

beginning [] ending []

Amended return

Employer identification number (EIN)	File number	If address/phone below is new, mark an X in the box <input type="checkbox"/>	Business telephone number ()	If you claim an overpayment, mark an X in the box <input type="checkbox"/>
Legal name of corporation		Trade name/DBA		Date of incorporation
Mailing name (if different from legal name above) c/o Number and street or PO box		State or country of incorporation		Date received (for Tax Department use only)
City State ZIP code		County code		
NAICS business code number (from NYS Pub 910)		If you need to update your address or phone information for corporation tax, or other tax types, you can do so online. See <i>Business information</i> in Form CT-1.		Audit (for Tax Department use only)
NYS principal business activity		<input type="checkbox"/> ZIP code (U.S. headquarters) or <input type="checkbox"/> Name of country (foreign headquarters)		
Type of bank		New York assets		Total assets everywhere
Clearinghouse <input type="checkbox"/> Savings <input type="checkbox"/> Other commercial <input type="checkbox"/>				

If the IRS has completed an audit of any of your returns in the past 5 years, list years _____.

During the tax year, did you do business in the Metropolitan Commuter Transportation District (MCTD)? Yes No
If Yes, you must file Form CT-32-M.

You must mark an **X** in one of the following two checkboxes (see instructions):

If this is a final return, mark an **X** in this box

If you will be filing under Article 9-A for your tax period first beginning on or after January 1, 2015, mark an **X** in this box

A. Pay amount shown on line 15. Make payable to: New York State Corporation Tax Attach your payment here. Detach all check stubs. (See instructions for details.)	Payment enclosed
	A

B. Federal return filed: (mark an **X** in one box) **Attach a complete copy of your federal return.**

Form 1120 Form 1120F Consolidated basis Other: _____

C. If you included a qualified subchapter S subsidiary (QSSS) in this return, mark an **X** in the box and attach Form CT-60-QSSS

D. Are you a member of a federal consolidated group? Yes No

If Yes, complete items a through c below.

a. Number of corporations included in the federal consolidated group.....

b. Total consolidated federal taxable income (FTI) before the net operating loss (NOL) deduction...

c. If 65% or more of the voting stock of this corporation is owned or controlled, directly or indirectly, by another corporation, give the name and EIN of that corporation below.

Legal name of corporation	EIN
---------------------------	-----

E. If you are an authorized foreign bank holding company or an authorized foreign corporation that is 65% or more owned by a banking corporation or a bank holding company as defined in the instructions under *Who must file*, item D, mark box.

F. Did you include any disregarded entities in this return? (mark an **X** in the appropriate box)..... Yes No
If Yes, enter the name(s) and EIN(s) on Form CT-60-QSSS and attach it to your return.

420001140094



G. Are you a residual interest holder in a real estate mortgage investment conduit (REMIC)? (mark an **X** in one box) Yes No

Schedule A – Computation of tax and installment payments of estimated tax

1	Allocated taxable entire net income (ENI) (enter amount from line 61, and multiply by the tax rate of 7.1% (.071))			×	.071	•	1	
2	Allocated taxable alternative ENI from line 69 (see instructions)			×	.03	•	2	
3	Allocated taxable assets (enter amount from line 73 and multiply by the appropriate tax rate; mark an X in the box; see instr.)	.00002	<input type="checkbox"/>	.00004	<input type="checkbox"/>	.0001	<input type="checkbox"/>	3
4	Fixed minimum tax						4	250 00
5	Franchise tax (amount from line 1, 2, 3, or 4, whichever is largest)						5	
6	Tax credits (see instructions)						6	
7	Net franchise tax (subtract line 6 from line 5; see instructions)						7	
First installment of estimated tax for next period:								
8a	If you filed an application for extension, enter amount from Form CT-5, line 2						8a	
8b	If you did not file Form CT-5 and line 7 is over \$1,000, see instructions						8b	
9	Total (add line 7 and line 8a or 8b)						9	
10	Total prepayments from line 167						10	
11	Balance (if line 10 is less than line 9, subtract line 10 from line 9)						11	
12	Estimated tax penalty (see instructions; mark an X in the box if Form CT-222 is attached)		<input type="checkbox"/>				12	
13	Interest on late payment (see instructions)						13	
14	Late filing and late payment penalties (see instructions)						14	
15	Balance due (add lines 11 through 14 and enter here; enter payment amount on line A on page 1)						15	
16	Overpayment (if line 9 is less than line 10, subtract line 9 from line 10)						16	
17	Amount of overpayment to be credited to the next period						17	
18	Balance of overpayment (subtract line 17 from line 16)						18	
19	Amount of overpayment to be credited to Form CT-32-M						19	
20a	Refund of overpayment (subtract line 19 from line 18)						20a	
20b	Refund of unused tax credits (see instructions)						20b	
20c	Tax credits to be credited as an overpayment to next year's tax return (see instructions)						20c	
21	Issuer's allocation percentage (see instructions; show computation on page 9)						21	%

Schedule B – Computation and allocation of ENI

22	FTI before NOL and special deductions (see instructions)						22	
Additions								
23	Dividends and interest effectively connected with the conduct of a trade or business not included on line 22 by alien corporations (see instructions)						23	
24	Income effectively connected with the conduct of a trade or business not included on line 22 by alien corporations (see instructions)						24	
25	Dividends and interest not included on line 22 by non-alien corporations (see instructions)						25	
26	Income taxes paid to the United States, its possessions, or foreign countries, deducted on federal return (see instructions)						26	
27	New York State franchise, MTA surcharges, and Article 23 MCTMT taxes deducted on federal return (see instr.)						27	
28	Total federal depreciation from Form CT-399 and, if applicable, from lines 76 and 78 (see instr.)						28	
29	New York State gains or losses on disposition of property from line 80						29	
30	Amount deducted on your federal return as a result of a safe harbor lease (see instructions)						30	
31	Amount that would have been required to be included on your federal return except for a safe harbor lease (see instructions)						31	
32	Amount of special additional mortgage recording tax deducted on your federal return and claimed as a tax credit (see instructions)						32	
33	Any other federal deduction previously allowable as a deduction under Article 9-B or 9-C (attach explanation)						33	
34								
35								
36	Other additions (see instructions) • IRC section 199 deduction:						36	
37	Total additions (add lines 23 through 36)						37	

(continued)



Schedule B – Computation and allocation of ENI (continued)

Subtractions

38	Interest and other expenses not deducted on federal return that are applicable to lines 23, 24, and 25 (see instructions).....	•	38		
39	Enter total amount of allowable New York depreciation from Form CT-399 and, if applicable, from line 79 (see instructions)	•	39		
40	Federal gains or losses on disposition of property from lines 81 and 83.....		40		
41	Federal income or gain from installment method transactions under Article 9-B or 9-C (see instr.)	•	41		
42	IRC section 78 dividends included in the computation of lines 22 through 25.....	•	42		
43	Amount included on your federal return as a result of a safe harbor lease (see instructions).....	•	43		
44	Amount that would have been deducted on your federal return except for safe harbor lease (see instr.)	•	44		
45	Amount of wages not deducted on the federal return due to IRC section 280C (see instructions)	•	45		
46	Amount of money received from the FDIC, FSLIC, or RTC (see instructions)	•	46		
47	Interest income from subsidiary capital (attach list; see instr.) \$		47		
48	Dividend income from subsidiary capital (see instr.)		48		
49	Net gains from subsidiary capital (see instructions)		49		
50	Interest income on obligations of New York State, its political subdivisions, and the United States (attach list; see instructions)		50		
51	Adjusted eligible net income of an international banking facility (IBF) from line 107 (see instructions)	•	51		
52					
53					
54					
55					
56	New York State NOL deduction (see instructions)	•	56		
57	Other subtractions (see instr.) S-4 • <input type="text"/> S-6 • <input type="text"/>	•	57		
58	Total subtractions (add lines 38 through 57)	•	58		
59a	ENI (add line 22 and line 37; subtract line 58)	•	59a		
59b	Allocated ENI (multiply line 59a by <input type="text"/> % from line 131 or line 123)		59b		
60	Optional depreciation adjustments (add lines 77 and 82; see instructions)		60		
61	Allocated taxable ENI (line 59b plus or minus line 60; enter on Schedule A, next to line 1)		61		

Schedule C – Computation and allocation of alternative ENI

62	ENI from line 59a (see instructions)		62		
63	Interest income from subsidiary capital from line 47	•	63		
64	Dividend income and net gain from subsidiary capital from lines 48 and 49.....	•	64		
65	Interest income on obligations of New York State, its political subdivisions, and the United States, from line 50.....	•	65		
66	Alternative ENI (add lines 62 through 65)		66		
67	Allocated alternative ENI: (multiply line 66 by <input type="text"/> % from line 137 or line 123)		67		
68	Optional depreciation adjustments from line 60.....		68		
69	Allocated taxable alternative ENI (line 67 plus or minus line 68; enter here and on Schedule A, next to line 2)		69		



Schedule D – Computation of taxable assets and tax rate (see instructions)

70	Average value of total assets (see instructions).....	•	70		
71	Money or other property received from the FDIC, FSLIC, or RTC (see instructions)	•	71		
72	Taxable assets (subtract line 71 from line 70)		72		
73	Allocated taxable assets: (multiply line 72 by <input type="text" value=""/> % from line 161 or line 153; enter here and on Schedule A, next to line 3)	•	73		
74	Compute net worth ratio (see instructions):				
	Net worth on last day of the tax year =				
	Total assets on last day of the tax year		74		%
75	Compute percentage of mortgages included in total assets (see instructions):				
	Average quarterly balance of mortgages =				
	Average quarterly balance of total assets		75		%

Tax rates

Use the chart below to determine your tax rate. This rate must be used to compute the alternative minimum tax measured by taxable assets. You must meet **both** the net worth ratio and percentage of mortgages included in the total assets requirements to qualify for the lower tax rates.

Mark an **X** in the appropriate box in the last column and use this rate on line 3.

If the net worth ratio (from line 74) is:	And the % of mortgages included in total assets (from line 75) is:	The tax rate is:	Indicate the appropriate rate
Less than 4%	33% or more	.00002	
At least 4% but less than 5%	33% or more	.00004	
All others	All others	.0001	

Schedule E – Depreciation on certain property when method differs from federal (see instructions)

Part 1 – Depreciation on qualified New York property acquired between January 1, 1964, and December 31, 1967 (list each property and the date acquired here; for each property, complete columns C through H on the corresponding lines below; see instructions)

Item	A Description of property						B Date acquired
	C Cost	D Federal depreciation prior years	E Federal depreciation this year	F New York depreciation prior years	G New York depreciation this year	H Undepreciated balance	
A							
B							
C							
D							
E							
Totals			•		•		

76 Add column E amounts _____ ↑
Combine this total with line 78, and enter on line 28.

77 Add column G amounts _____ ↑
Combine this total with line 82, and enter on line 60.



Part 2— Other property on which New York depreciation differs from federal (see instructions)

Item	A Description of property					B Date acquired
A						
B						
C						
D						
E						
Item	C Cost	D Federal depreciation prior years	E Federal depreciation this year	F New York depreciation prior years	G New York depreciation this year	H Undepreciated balance
A						
B						
C						
D						
E						
Totals			•		•	

78 Add column E amounts _____
Combine this total with line 76, and enter on line 28.

79 Add Part 2 column G amounts; enter on line 39 _____

Schedule F – Computation of New York gain or loss on disposition of certain property acquired prior to January 1, 1973 (see instructions)

Part 1 – Property acquired prior to: 1/1/26 by commercial banks; 1/1/44 by savings banks; 1/1/53 by savings and loan associations

A Description of property	B Cost or fair market price on valuation date	C Selling price	D New York gain or loss (column C - column B)	E Federal gain or loss
Totals (use minus (-) sign to indicate negative amount) •			•	

80 Add column D amounts; enter on line 29 _____

81 Add column E amounts; combine this total with line 83, and enter on line 40 _____

Part 2 – Property on which optional depreciation was claimed or on which the method used for New York State differed from federal depreciation deducted

A Description of property	B Depreciation basis for New York State	C Selling price	D New York gain or loss (column C - column B)	E Federal gain or loss
Totals (use minus (-) sign to indicate negative amount) •			•	

82 Add column D amounts; combine this total with line 77, and enter on line 60 _____

83 Add column E amounts; combine this total with line 81, and enter on line 40 _____

420005140094



Schedule G – Computation of IBF adjusted eligible net income or loss (see instructions)

If the corporation has an IBF located in New York State, mark an **X** in the appropriate box below.

The corporation computed ENI using the: IBF modification method or IBF formula allocation method

Computation of eligible gross income

84	Interest income from eligible loans.....	84	
85	Interest income from eligible deposits.....	85	
86	Income from foreign exchange trading and hedging transactions.....	86	
87	Fee income from eligible transactions.....	87	
88	Eligible gross income (add lines 84 through 87)	88	

Computation of applicable expenses

89	Direct expenses.....	89	
90	Indirect expenses	90	
91	Total applicable expenses (add lines 89 and 90)	91	

Computation of ineligible funding amount

92	Eligible net income (subtract line 91 from line 88)	92	
93	Average aggregate liabilities and other sources of funds of the IBF that are not owed to or received from foreign persons	93	
94	Average aggregate liabilities and other sources of funds of the IBF.....	94	
95	Divide line 93 by line 94.....	95	%
96	Ineligible funding amount (multiply line 92 by line 95)	96	
97	Remaining amount (subtract line 96 from line 92; also enter on line 105)	97	

Computation of floor amount and adjusted eligible net income or loss

98	Average aggregate amount of loans to and deposits with foreign persons in financial accounts within New York State for tax years 1975, 1976, and 1977	98	
99	Statutory percentage for the current tax year	99	%
100	Multiply line 98 by line 99.....	100	
101	Average aggregate amount of loans to and deposits with foreign persons in financial accounts within New York State (other than IBF) for the current tax year.....	101	
102	Balance (subtract line 101 from line 100)	102	
103	Average aggregate amount of loans to and deposits with foreign persons in financial accounts of the IBF for the current tax year	103	
104	Enter 100 or the percentage obtained by dividing line 102 by line 103, whichever is less	104	%
105	Remaining amount (enter amount from line 97)	105	
106	Floor amount (multiply line 104 by line 105)	106	
107	Adjusted eligible net income or loss (subtract line 106 from line 105; also enter on line 51)	107	



Schedule H – Allocation percentages (see instructions)

Are you a banking corporation described in Tax Law, Article 32, section 1452(a)(9)? Yes No

Are you substantially engaged in providing management, administrative, or distribution services to an investment company as such terms are defined in Tax Law, Article 32, section 1454(a)(2)(G)? Yes No

If you answered Yes to **both** questions, then you must allocate using the receipts factor (see Receipts factor in instructions).

Part 1 – Computation of ENI allocation

If the corporation has an IBF located in New York State, mark an **X** in the appropriate box below (see Schedule G instructions).

The corporation computed ENI using the: IBF modification method or IBF formula allocation method

If you are claiming an allocation outside New York, attach an explanation of the business carried on outside New York that gives you the right to allocate.		A New York State	B Everywhere
108	Wages, salaries, and other compensation of employees (except general executive officers)		
109	Multiply line 108, column A, by 80% (.8)		
110	Percentage in New York (divide line 109, column A, by line 108, column B)		%
Receipts during the tax period from:			
111	Interest income from loans and financing leases		
112	Other income from loans and financing leases		
113	Lease transactions and rents		
114	Interest from bank, credit, travel, entertainment, and other credit card receivables		
115	Service charges and fees from bank, credit, travel, entertainment, and other credit cards		
116	Receipts from merchant discounts.....		
117	Income from trading activities and investment activities		
118	Fees or charges from letters of credit, traveler's checks, and money orders		
119	Performance of services.....		
120	Royalties		
121	All other business receipts		
122	Total (add lines 111 through 121)		
123	Percentage in New York (see instructions)		%
124	Additional receipts factor (enter percentage from line 123)		%
Deposits maintained in branches			
125	Deposits of \$100,000 or more		
126	Deposits of less than \$100,000		
127	Add lines 125 and 126.....		
128	Percentage in New York (divide line 127, column A, by line 127, column B)		%
129	Additional deposits factor (enter percentage from line 128)		%
130	Total of New York percentages (add lines 110, 123, 124, 128, and 129)		%
131	ENI allocation percentage (see instructions)		%

Part 2 – Computation of alternative ENI allocation

132	Wages, salaries, and other compensation of employees (except general executive officers)		
133	Percentage in New York State (divide line 132, column A, by line 132, column B)		%
134	Receipts factor (enter percentage from line 123)		%
135	Deposits factor (enter percentage from line 128)		%
136	Add lines 133, 134, and 135		%
137	Alternative ENI allocation percentage (see instructions)		%



Part 3 – Computation of taxable assets allocation

Include all activities of an IBF in both the numerator (column A) and denominator (column B) when computing the taxable asset allocation		A New York State	B Everywhere
138	Wages, salaries, and other compensation of employees (except general executive officers)		
	138		
139	Multiply line 138, column A, by 80% (.8)		
	139		
140	Percentage in New York (divide line 139, column A, by line 138, column B)		%
	140		
Receipts during the tax period from:			
141	Interest income from loans and financing leases		
	141		
142	Other income from loans and financing leases		
	142		
143	Lease transactions and rents		
	143		
144	Interest from bank, credit, travel, entertainment, and other credit card receivables		
	144		
145	Service charges and fees from bank, credit, travel, entertainment, and other credit cards		
	145		
146	Receipts from merchant discounts.....		
	146		
147	Income from trading activities and investment activities		
	147		
148	Fees or charges from letters of credit, traveler's checks, and money orders....		
	148		
149	Performance of services.....		
	149		
150	Royalties		
	150		
151	All other business receipts		
	151		
152	Total (add lines 141 through 151)		
	152		
153	Percentage in New York (see instructions)		%
	153		
154	Additional receipts factor (enter percentage from line 153)		%
	154		
Deposits maintained in branches			
155	Deposits of \$100,000 or more		
	155		
156	Deposits of less than \$100,000		
	156		
157	Add lines 155 and 156.....		
	157		
158	Percentage in New York (divide line 157, column A, by line 157, column B)		%
	158		
159	Additional deposits factor (enter percentage from line 158)		%
	159		
160	Total of New York percentages (add lines 140, 153, 154, 158, and 159)		%
	160		
161	Taxable assets allocation percentage (see instructions).....		%
	161		

Composition of prepayments on Schedule A, line 10 (see instructions)

		Date paid	Amount
162	Mandatory first installment		
	162		
163a	Second installment from Form CT-400.....		
	163a		
163b	Third installment from Form CT-400		
	163b		
163c	Fourth installment from Form CT-400.....		
	163c		
164	Payment with extension request from Form CT-5, line 5		
	164		
165	Overpayment credited from prior years (see instructions).....		
	165		
166	Overpayment credited from Form CT-32-M		
	166		
167	Total prepayments (add lines 162 through 166; enter here and on line 10)		
	167		



Computation of the issuer's allocation percentage — Complete Method 1, 2, or 3 (see instructions)

Method 1 — Enter the alternative ENI allocation percentage from line 137 (enter here and on line 21) ● %

Method 2 — A New York State gross income \$
 B Worldwide gross income \$

Divide line A by line B (enter here and on line 21) ● %

Method 3 — Computation of subsidiary capital allocated to New York State — Attach separate sheets displaying this information formatted as below, if necessary.

A — Description of subsidiary capital (list the name of each corporation and the EIN here; for each corporation, complete columns B through G on the corresponding lines below; see instructions)

Item	Name	EIN
A		
B		
C		
D		
E		
F		
G		

A Item	B Voting stock owned %	C Average value of subsidiary capital (see instructions)	D Current liabilities attributable to subsidiary capital (see instructions)	E Net average value (col. C – col. D)	F Issuer's allocation % (see instr.)	G Value allocated to New York State (col. E × col. F)
A						
B						
C						
D						
E						
F						
G						
Amounts from attached list						
168 Totals				168		

Method 3 — Computation of business capital allocated to New York State

169 Average value of total assets from line 70.....	169	
170 Current liabilities (see instructions)	170	
171 Total net average value of subsidiary capital from line 168, column E	171	
172 Net business assets (subtract lines 170 and 171 from line 169)	172	
173 Enter the alternative ENI allocation percentage from line 137	173	%
174 Business assets allocated to New York State (multiply line 172 by line 173)	174	

Method 3 — Computation of issuer's allocation percentage

175 Subsidiary capital and business capital allocated to New York State (add line 168, column G and line 174)	175	
176 Total worldwide capital (see instructions)	176	
177 Issuer's allocation percentage (divide line 175 by line 176; enter here and on line 21)	177	%

420009140094



Summary of tax credits claimed on line 6 against current year's franchise tax (attach applicable forms; see instructions for line 6)

Have you been convicted of an offense, or are you an owner of an entity convicted of an offense, defined in New York State Penal Law Article 200 or 496, or section 195.20? (see Form CT-1; mark an X in one box) Yes • No •

Form CT-41... •		Form CT-601 ... •		Form CT-613 •	
Form CT-43... •		Form CT-601.1 •		Form CT-631 •	
Form CT-44... •		Form CT-602 ... •		Form CT-633 •	
Form CT-238 •		Form CT-604 ... •		Form CT-634 •	
Form CT-249 •		Form CT-606 ... •		Form CT-639 •	
Form CT-250 •		Form CT-607 ... •		Form DTF-624 •	
Form CT-259 •		Form CT-611 ... •		Form DTF-630 •	
Form CT-501 •		Form CT-611.1 •		Credit for servicing mortgages (attach statement) •	
Form CT-502 •		Form CT-612 ... •		Other credits •	

178 Total of credits listed above (enter here and on line 6 indicating a negative total with a minus (-) sign; attach appropriate form or statement for each credit claimed) • **178**

179 Total tax credits claimed on line 178 that are refund eligible (see instructions)..... • **179**

Amended return information

If filing an amended return, mark an X in the box for any items that apply and attach documentation.

Final federal determination • If marked, enter date of determination: • _____

Capital loss carryback..... • Federal return filed Form 1139 • Form 1120X..... •

Net operating loss (NOL) information

New York State NOL carryover total available for use this tax year from all prior tax years •

Federal NOL carryover total available for use this tax year from all prior tax years..... •

New York State NOL carryforward total for future tax years..... •

Federal NOL carryforward total for future tax years..... •

Third – party designee (see instructions)	Yes <input type="checkbox"/> No <input type="checkbox"/>	Designee's name (print)	Designee's phone number ()
	Designee's e-mail address		PIN

Certification: I certify that this return and any attachments are to the best of my knowledge and belief true, correct, and complete.

Authorized person	Printed name of authorized person	Signature of authorized person	Official title
	E-mail address of authorized person	Telephone number ()	Date
Paid preparer use only (see instr.)	Firm's name (or yours if self-employed)	Firm's EIN	Preparer's PTIN or SSN
	Signature of individual preparing this return	Address	City State ZIP code
	E-mail address of individual preparing this return	Preparer's NYTPRIN	Date

See instructions for where to file.

